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CONFIRMATION NO. 5129

SERIAL NUMBER 10/807,941	FILING OR 371(c) DATE 03/24/2004 RULE	CLASS 600	GROUP ART UNIT 3762	ATTORNEY DOCKET NO. CWO-002.02
APPLICANTS Yoram Rudy, Shaker Heights, OH;				
** CONTINUING DATA ***** This application is a CON of 09/463,427 03/29/2000 PAT 6,839,588 * which is a 371 of PCT/US98/15712 07/29/1998 which claims benefit of 60/054,342 07/31/1997 (*)Data provided by applicant is not consistent with PTO records.				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 06/04/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY OH	SHEETS DRAWING 37	TOTAL CLAIMS 18 INDEPENDENT CLAIMS 4
ADDRESS Yoram Rudy 3030 Huntington Road Shaker Heights, OH44120				
TITLE Electrophysiological cardiac mapping system based on a non-contact non-expandable miniature multi-electrode catheter and method therefor				
FILING FEE RECEIVED 428	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	